

PROTOCOLS, MEDICATIONS AND DEVICES COMMITTEE
MINUTES
September 27, 2001

MEMBERS PRESENT: Dr. Richard Thomas, Dr. Jane Lee, Dr. Charles Finch, Patricia Ellis, Rob Jarvis, Janine Anderson, Terence Mason, and Terry Shine.

MEMBERS ABSENT: Dr. Steven Curry, Dr. John Gallagher, Marc Holyfield, Sue Kern, and Dean Wright.

GUESTS: Dr. David Bark, Dr. Toni Brophy, Holly Gibeaut, Barbara Glickman-Williams, Susan Hinze, Dr. Kay Lewis, Roberto Torres, and Mark Venuti.

BEMS STAFF PRESENT: Don Decker, Dr. Garth Gemar, Peggy Lahren, Larry Lorenzen, Dona Markley, Susan Nicolas, and Howard Schwartz.

I. CALL TO ORDER

Dr. Richard Thomas called the meeting to order at 1:19 p.m. A quorum was present.

II. APPROVAL OF MEETING MINUTES

It was pointed out that on Page 2, Section V, Subsection A, third line, the word “Strider” should be spelled “Stridor.” With that one correction, the minutes were approved.

III. CHAIRMAN’S REPORT

Dr. Thomas had nothing new to report.

IV. OLD BUSINESS

A. Discussion and Action on Haz-Mat Protocol

Mark Venuti presented this item. A discussion of the handout “Agenda Item IV-A – Haz-Mat Draft Protocol” ensued. The following suggested corrections agreed to by the Committee were made to the document and sent to Rules Committee:

1. Page 2, Subsection B, third line, “a course” was changed to “continuing education.”
2. Page 2, Subsection C, first line, “for Haz-Mat duty” added after “director”
3. Page 3, Subsection E, was changed as follows:

E. A paramedic who successfully completes a course and maintains CME in advanced toxicology as described in subsection (A):

1. Shall carry the following drugs in quantities authorized through medical direction:

- a. Atropine,**
- b. Cyanide Antidote Kit,**
- c. Methylene Blue,**
- d. Pralidoxime (2-PAM), and**

2. May carry the following drugs in quantities authorized through medical direction:
 - a. Calcium Chloride,
 - b. Diazepam,
 - c. Proparacaine,
 - d. Propranolol, and
 - e. Terbutaline, and
3. Administer a drug listed in subsections (E)(1 + 2) in a hazardous materials incident only when authorized through medical direction and only in the dosages authorized through medical direction.

B. Discussion and Action on Combitube

Dr. Gemar presented this issue. A discussion of the handout “Agenda Item IV-B – Combitube Draft Protocol” ensued. The following changes were made to the document:

1. Page 1, Subsection A-3, was changed as follows:
Successfully completes an esophageal-tracheal Combitube training course approved by the basic emergency medical technician’s medical director that:
 - a. Includes:
(i. through iii. - same as in draft document)
 - b. Requires the basic emergency medical technician to demonstrate skills competency and no less than 80% score on any written exam.
2. Page 2, Subsection B, was changed to the following:
To continue to be authorized to use the Combitube dual lumen airway device, a basic emergency medical technician shall successfully complete continuing education for esophageal-tracheal Combitube as prescribed by the medical director.

Motion by Patricia Ellis, seconded by Janine Anderson, to modify the Combitube Draft Protocol as agreed by the Committee members. Motion carried.

C. Discussion and Action on Flowcharting of BEMS Treatment Guidelines

Janine Anderson presented the topic. She distributed three draft documents, first one titled “Pediatrics – Altered level of consciousness,” next one titled “Respiratory Difficulty Treatment Protocol Guidance Document #1,” and the last one titled “CEP – Breech Limb Presentation.” Dr. Thomas asked the members to only look at the format today and we will look at content at the next meeting. All members agreed that the format looked good.

V. NEW BUSINESS

A. Discussion and Action on the Addition of Amiodarone (Cordarone) to the Transport Drug List

Karen Nelson presented the item. Consensus of the Committee was that this is appropriate for use by paramedics. A discussion of the document “Agenda Item V. A.,” which is the drug profile for Amiodarone, ensued to look for errors or items that need deleted or added. The following corrections were made:

1. Page 1, under “Indications for use;” last line, delete “when other therapies fail.”
2. Page 1, under “Incompatibilities/Drug Interactions;” line 3, delete “precipitates” and add “is incompatible” after “Amiodarone.”
3. Page 2, delete the entire section titled “For cardiac arrest-pulseless VT and VF.”
4. Page 2, delete the entire section titled “Pediatric Dose.”
5. Page 2, under “Special Notes;” sentence 3, change to read: “Must be on a cardiac monitor, monitor heart rate and rhythm.”
6. Page 2, under “Special Notes;” sentence 4, add “infusion” after “IV.”

Motion by Patricia Ellis and seconded by Dr. Finch to approve the drug profile as amended. Motion carried.

Motion by Dr. Lee, seconded by Dr. Finch, to approve the use of Amiodarone (Cordarone) by paramedics. Motion carried.

B. Discussion and Action on Temperature Requirements for Oxytocin (Pitocin)

Karen Nelson presented the item. A discussion of the issue ensued. A survey of the Committee members showed that, in the majority, the hospitals and ambulance services hasn’t used this drug in a long period. Because of this fact, a motion by Patricia Ellis, seconded by Rob Jarvis, to delete this drug from the Paramedic and EMT-I Drug Boxes but not from the Interfacility Transport Drug Box. Motion carried.

C. Discussion and Action on the Removal of Neosynephrine and Placement of Afrin in Drug Box

Dr. Gemar requested that this item be tabled until next meeting.

D. Discussion and Action on Nasal Narcan

Clarified minutes from MDC. Dr. Lee will present any research that has been done on this topic since the original research at the next meeting.

E. Discussion and Action on the Use of Versed in the RSI/MAI Pilot Project

A copy of the drug profile for Versed was distributed. A discussion on the drug profile ensued looking for corrections, additions and/or deletions. The following modifications were made to the document:

1. Page 1, category "Indications and Field Use," delete the words "and Field Use"; move "Sedation" above "Anticonvulsant"; after "Anticonvulsant" add the words "for pediatrics"; delete the words "Management of acute agitation."
2. Page 1, category "Adverse Reactions:," subcategory "CV," change the words "fast heartbeat" to "tachycardia."
3. Page 1, category "Notes on Administration:," line 3, correct the spelling of "phelibitis" to "phlebitis"; line 4, add "and cimetidine" after "erythromycin."
4. Page 2, category "Incompatibilities/Drug Interactions:," (from bottom of Page 1), line 3, delete "may double" and insert in its place "and cimetidine may significantly prolong".
5. Page 2, category "Pediatric Dosage," delete the entire subcategory "Patients over 6 months of age:." In subcategory "Patients 6 months to 5 years:" delete the line "total dose up to 0.6mg/kg; titrate to effect slowly in small increments over 2 to 3 minutes," and insert in its place "administer slowly in small increments of no more than 2.0mg over at least 2 minutes;" and in subcategory "Patients 6 to 12 years of age:" delete the line "total dose up to 0.4mg/kg; titrate to effect slowly in small increments over 2 to 3 minutes," and insert in its place "administer slowly in small increments of no more than 2.0mg over at least 2 minutes;".
6. Page 3, category "Arizona Drug Box Supply Range:," under both "PARAMEDIC:" and "INTERMEDIATE:," change to say "1-2 vials 5mg/5mL."
7. Page 3, delete the entire category "Special Notes: Flumazenil is the accepted antagonist for midazolam."

Motion by Dr. Finch, seconded by Patricia Ellis, to accept the Versed Drug Profile as corrected by the Committee. Motion carried.

Motion by Patricia Ellis and seconded by Terence Mason to allow as an option to carry Versed in the Paramedic/EMT-I Drug Boxes. Motion carried.

F. Discussion and Action on Mesa Fire Department's Immunization Pilot Project

Dr. Gemar and Dr. Brophy presented this topic. Basically, the Bureau would like to see the list of immunizations in R9-25-801 eliminated and have the Medical Direction authority for the immunization program have the ability to dictate

which immunizations can be given. The Bureau has presented this to Administrative Rules Section and hopefully they will have this happen at their next meeting. Because of this, there is no action by the Committee on this item.

G. Announcement of Quarterly Meeting Dates for 2002

The new quarterly meeting dates for all of the committees for 2002 was presented to the members. Nobody in the Committee had problems with the dates. No action by the Committee.

H. Discussion and Action on Administration of Aspirin by EMT-Bs to Chest Pain Patients

This topic was presented by Dr. Brophy. Discussion ensued. Motion by Terence Mason, seconded by Patricia Ellis, for EMT-Bs may carry, administer or assist in administration of Aspirin to patients with chest pain. Motion carried.

I. Discussion and Action on Addition of New Membership Category to PMD – “Pediatric Emergency Medicine”

Dr. Thomas presented this item and requested that the Committee approve the deletion of membership category #13 – “State Board of Pharmacy Representative” and add a new category called “Pediatric Emergency Medicine.” Motion by Terry Shine and seconded by Terence Mason to drop the category of “State Board of Pharmacy Representative” and add a new category of “Pediatric Emergency Medicine.” Motion carried. This item needs to go to MDC for a Rules Committee Bylaws change.

VI. CALL TO THE PUBLIC

None to report.

VII. NEXT MEETING

The next regular meeting of the PMD Committee is scheduled for November 15, 2001 at 1:00 p.m.

VIII. ADJOURNMENT

The meeting was adjourned at 4:00 p.m.

Approved by PMD Committee on 2/21/02